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**CONFIRMATION NO. 6594**

<b>SERIAL NUMBER</b> 09/616,483	<b>FILING DATE</b> 07/14/2000  <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3743	<b>ATTORNEY DOCKET NO.</b> 21629-001
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**APPLICANTS**  

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**\*\* CONTINUING DATA \*\*** *NONE mp*

**\*\* FOREIGN APPLICATIONS \*\*** *NONE mp*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
**\*\* 08/31/2000**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 1
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Verified and Acknowledged *[Signature]* Examiner's Signature *[Initials]*

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**TITLE**  
 Drug delivery device for animals

<b>FILING FEE RECEIVED</b> 419	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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